Case 14-36850-KLP Doc 1 Filed 12/31/14 Entered 12/31/14 10:45:54 Desc Main Document Page 1 of 55

B1 (Official Form 1)(04/13)			Jannone	. a	90 ± 0.				
Un	nited Stat Eastern	tes Bankr District of						Volu	ntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Adams, James C.					of Joint De ams, Sha	ebtor (Spouse) aron L.	(Last, First,	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				(includ	le married,	used by the J maiden, and n Charlton	trade names)		rears
Last four digits of Soc. Sec. or Individu (if more than one, state all)	ıal-Taxpayer I.I	D. (ITIN)/Comp	olete EIN	(if more	our digits of than one, state	all)	Individual-7	Гахрауег I.D.	(ITIN) No./Complete EIN
Street Address of Debtor (No. and Street 8867 Emerald Dunes Circle Chesterfield, VA	et, City, and Sta	ate):	ZIP Code	Street 886	Address of	Joint Debtor	•	reet, City, and	I State): ZIP Code
County of Residence or of the Principal Chesterfield	l Place of Busir		23832		y of Reside	nce or of the	Principal Pla	ace of Busine	23832 ss:
Mailing Address of Debtor (if different	from street add	dress):		Mailin	g Address	of Joint Debto	or (if differer	nt from street	address):
		_	ZIP Code	4					ZIP Code
Location of Principal Assets of Busines (if different from street address above):	ss Debtor			•					
Type of Debtor (Form of Organization) (Check one b			f Business			•	-	otcy Code Un	
Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLF ☐ Partnership ☐ Other (If debtor is not one of the above check this box and state type of entity be	P)	(Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other			☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	hapter 15 Peti a Foreign Ma hapter 15 Peti	ition for Recognition ain Proceeding ition for Recognition onmain Proceeding
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	, DE	Tax-Exempt Entity (Check box, if applicable) ☐ Debtor is a tax-exempt organizatio under Title 26 of the United States Code (the Internal Revenue Code).			defined "incurr	re primarily co l in 11 U.S.C. § ed by an indivienal, family, or l	nsumer debts, 101(8) as dual primarily	for	Debts are primarily business debts.
☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				otor is a snotor is not otor's aggraless than sapplicable lan is being	egate nonco 62,490,925 (as boxes: ag filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	efined in 11 U ted debts (exc to adjustment	C. § 101(51D). J.S.C. § 101(51 Cluding debts ov on 4/01/16 and	D). wed to insiders or affiliates) d every three years thereafter). lasses of creditors,
Statistical/Administrative Informatio ■ Debtor estimates that funds will be a □ Debtor estimates that, after any exerthere will be no funds available for	available for dis	excluded and a	secured creditadministrative		es paid,		THIS	SPACE IS FO	R COURT USE ONLY
Estimated Number of Creditors	0- 1,000-	5,001- 10,000] 5,001-),000	50,001- 100,000	OVER 100,000			
\$50,000 \$100,000 \$500,000 to \$	00,001 \$1,000,0	01 \$10,000,001 to \$50 million	to \$100 to	00,000,001 \$500 illion	\$500,000,001 to \$1 billion	More than \$1 billion			
\$50,000 \$100,000 \$500,000 to \$	00,001 \$1,000,0	01 \$10,000,001 to \$50 million	to \$100 to		\$500,000,001 to \$1 billion	More than \$1 billion			

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Adams, James C. Adams, Sharon L. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Pia J. North **December 23, 2014** Signature of Attorney for Debtor(s) (Date) Pia J. North 29672 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

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Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ James C. Adams

Signature of Debtor James C. Adams

X /s/ Sharon L. Adams

Signature of Joint Debtor Sharon L. Adams

Telephone Number (If not represented by attorney)

December 23, 2014

Date

Signature of Attorney*

X /s/ Pia J. North

Signature of Attorney for Debtor(s)

Pia J. North 29672

Printed Name of Attorney for Debtor(s)

North Law Bar# 29672

Firm Name

5913 Harbour Park Drive Midlothian, VA 23112

Address

Email: Help@pianorth.com

(804) 739-3700 Fax: (804) 739-2550

Telephone Number

December 23, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Adams, James C. Adams, Sharon L.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Virginia

In re	James C. Adams Sharon L. Adams		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont. Page 2
□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); □ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: //s/ James C. Adams James C. Adams
Date: December 23, 2014

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Virginia

In re	James C. Adams Sharon L. Adams		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page
☐ 4. I am not required to receive a credit cou	inseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	- 11
1	§ 109(h)(4) as impaired by reason of mental illness or
± • ·	alizing and making rational decisions with respect to
financial responsibilities.);	
<u>*</u>	109(h)(4) as physically impaired to the extent of being
• •	in a credit counseling briefing in person, by telephone, or
through the Internet.);	in a creat counseling offering in person, of telephone, of
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy	administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in	· · · · · · · · · · · · · · · · · · ·
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Sharon L. Adams
Signature of 2 cotors	Sharon L. Adams
Date: December 23, 2	2014

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Eastern District of Virginia

In re	James C. Adams, Sharon L. Adams		Case No.	
		Debtors	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	218,000.00		
B - Personal Property	Yes	4	192,785.45		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	2		372,020.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		10,410.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			6,414.06
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,904.06
Total Number of Sheets of ALL Schedu	ıles	20			
	T	otal Assets	410,785.45		
			Total Liabilities	382,430.00	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Eastern District of Virginia

In re	James C. Adams,		Case No	
	Sharon L. Adams			
_		Debtors	Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	6,414.06
Average Expenses (from Schedule J, Line 22)	5,904.06
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	8,515.01

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		111,870.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		10,410.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		122,280.00

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B6A (Official Form 6A) (12/07)

_		
In re	James C. Adams,	Case No
	Sharon I Adams	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Residence: 8867 Emerald Dunes Circle, Chesterfield VA 23832 Current Market Analysis - \$215,000 August 2014 Tax Assessment - \$215,600 Zillow Range - \$190,000 - \$215,000	Tenants by the Entire	eities J	215,000.00	315,851.00
Oklahoma Properties - Deed for Oil & Gas rights mineral rights 5 parcels, each parcel has mulitiple owners 250 - 2,500 owners. In 2012 he received a \$3,000 offer for his rights. These wells are over 75	Tenants in Common	н	3,000.00	0.00

Leases: Devon, Williams, Loftis, Sampson

years and at the end of their lifespan.

Sub-Total > **218,000.00** (Total of this page)

Total > **218,000.00**

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	James C. Adams,	Case No.
	Sharon L. Adams	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash - Approx.	н	19.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	 (J) Virginia Credit Union Checking Account - \$200 Approx. (J) Virginia Credit Union Savings Account - \$200 Approx. (H) Union First Market Bank Checing Account - \$70 Approx. (H) Union First Market Bank Savings Account - \$20 Approx. (H) Son's account approximately \$200 (None of the money in the account is from the Debtor) 	0	670.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	х		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods	J	5,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothes	J	500.00
7.	Furs and jewelry.	Wedding and Engagement Rings \$1,200 Misc. Costume Jewelry \$100	J	1,300.00
8.	Firearms and sports, photographic, and other hobby equipment.	1 pistol & 1 rifle	Н	100.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Employer Term Life Insurance policy NO Cash Value	н	0.00
		(Tota)	Sub-Total of this page)	al > 7,589.00

³ continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	James C. Adams,	Case No.
	Sharon L. Adams	

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Lo	ocation of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	Х				
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X				
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	,	Virginia Retirement System	Dec. 19, 2014	н	139,496.45
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
14.	Interests in partnerships or joint ventures. Itemize.	X				
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X				
16.	Accounts receivable.	X				
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X				
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X				
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

139,496.45

Sub-Total >

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In re	James C. Adams,
	Sharon L. Adams

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		NO Potential claims or lawsuits except Potential back Social Security for disability arising in January 2014	J	0.00
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	:	2013 Honda Ridgeline 16,000 miles PAY DIRECT	н	28,850.00
	other vehicles and accessories.	2	2010 Acura TSX 86,000 miles PAY DIRECT	J	16,300.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	;	3 dogs	J	50.00
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
			(Total	Sub-Total of this page)	al > 45,200.00

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In	re James C. Adams, Sharon L. Adams		Ca	se No.	
			Debtors		
		SCHEDUL	LE B - PERSONAL PROPERT (Continuation Sheet)	Y	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
35.	Other personal property of any kind not already listed. Itemize.	d Tools		Н	500.00

| Sub-Total > 500.00 (Total of this page) | Total > 192,785.45

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B6C (Official Form 6C) (4/13)

Animals 3 dogs

In re	James C. Adams,	Case No.
	Sharon L. Adams	

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT					
Debtor claims the exemptions to which debtor is entitled un (Check one box) 11 U.S.C. §522(b)(2) 11 U.S.C. §522(b)(3)		k if debtor claims a homestead exe ,675. (Amount subject to adjustment on 4/1/2 with respect to cases commenced on	1/16, and every three years thereaft		
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
Husband's Exemptions Real Property Residence: 8867 Emerald Dunes Circle, Chesterfield VA 23832 Current Market Analysis - \$215,000 August 2014 Tax Assessment - \$215,600 Zillow Range - \$190,000 - \$215,000	Va. Code Ann. § 34-4	1.00	215,000.00		
<u>Household Goods and Furnishings</u> Household Goods	Va. Code Ann. § 34-26(4a)	2,500.00	5,000.00		
Wearing Apparel Clothes	Va. Code Ann. § 34-26(4)	250.00	500.00		
Furs and Jewelry Wedding and Engagement Rings \$1,200 Misc. Costume Jewelry \$100	Va. Code Ann. § 34-26(1a)	200.00	1,300.00		
Firearms and Sports, Photographic and Other Hobb 1 pistol & 1 rifle	oy Equipment Va. Code Ann. § 34-26(4b)	50.00	100.00		
Interests in IRA, ERISA, Keogh, or Other Pension or Virginia Retirement System Dec. 19, 2014	Profit Sharing Plans Va. Code Ann. § 34-34	139,496.45	139,496.45		
Automobiles, Trucks, Trailers, and Other Vehicles 2013 Honda Ridgeline 16,000 miles PAY DIRECT	Va. Code Ann. § 34-26(8)	1.00	28,850.00		

Va. Code Ann. § 34-26(5)

Total: 142,523.45 390,296.45

25.00

50.00

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B6C (Official Form 6C) (4/13) -- Cont.

In re	James C. Adams,
	Sharon L. Adams

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
Wife's Exemptions Real Property Residence: 8867 Emerald Dunes Circle, Chesterfield VA 23832 Current Market Analysis - \$215,000 August 2014 Tax Assessment - \$215,600 Zillow Range - \$190,000 - \$215,000	Va. Code Ann. § 34-4	1.00	215,000.00		
Household Goods and Furnishings Household Goods	Va. Code Ann. § 34-26(4a)	2,500.00	5,000.00		
Wearing Apparel Clothes	Va. Code Ann. § 34-26(4)	250.00	500.00		
<u>Furs and Jewelry</u> Wedding and Engagement Rings \$1,200 Misc. Costume Jewelry \$100	Va. Code Ann. § 34-26(1a)	1,000.00	1,300.00		
Automobiles, Trucks, Trailers, and Other Vehicles 2010 Acura TSX 86,000 miles PAY DIRECT	Va. Code Ann. § 34-26(8)	0.00	16,300.00		
Animals 3 dogs	Va. Code Ann. § 34-26(5)	25.00	50.00		

Total: 3,776.00 238,150.00

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B6D (Official Form 6D) (12/07)

In re	James C. Adams,
	Sharon L. Adams

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J	NATURE OF LIEN, AND DESCRIPTION AND VALUE	COXT_XGEX	DZLLGDLDGH	Εl	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxxx1001 Bb&T Po Box 1847 Wilson, NC 27894		н	Opened 12/31/13 Last Active 7/16/14 Title 2013 Honda Ridgeline 16,000 miles PAY DIRECT	Т	TED			
Account No. xxxx1617	+	+	Value \$ 28,850.00 Opened 1/04/07 Last Active 6/09/14				35,657.00	6,807.00
Green Tree Servicing LLC 332 Minnesota St Ste 610 Saint Paul, MN 55101		J	2nd Deed of Trust Residence: 8867 Emerald Dunes Circle, Chesterfield VA 23832 Current Market Analysis - \$215,000 August 2014 Tax Assessment - \$215,600 Zillow Range - \$190,000 - \$215,000					
AAN-	+	+	Value \$ 215,000.00				70,500.00	70,500.00
Account No. Green Tree Servicing LLC CT Corporation System, Reg Ag 4701 Cox Rd, Ste 285 Glen Allen, VA 23060			Collection agency: Green Tree Servicing LLC				Notice Only	
	_	1	Value \$					
Account No. Green Tree Servicing LLC Keith Anderson, President 345 St. Peter Street Saint Paul, MN 55102			Collection agency: Green Tree Servicing LLC				Notice Only	
continuation sheets attached			Value \$ S (Total of the	l Subt his p			106,157.00	77,307.00

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	James C. Adams, Sharon L. Adams		Case No.	
•		Debtors	,	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	J H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONFINGEN	LIQUIDA	U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxx0482 Pnc Mortgage 6 N Main St Dayton, OH 45402		J	Opened 1/04/07 Last Active 7/01/14 Deed of Trust Residence: 8867 Emerald Dunes Circle, Chesterfield VA 23832 Current Market Analysis - \$215,000 August 2014 Tax Assessment - \$215,600 Zillow Range - \$190,000 - \$215,000	Т	T E D			
	╀	_	Value \$ 215,000.00				245,351.00	30,351.00
Account No. xxxxxxxx5489 Virginia Credit Union 7500 Boulders View Drive Richmond, VA 23225		J	Opened 5/21/14 Last Active 7/28/14 Title 2010 Acura TSX 86,000 miles PAY DIRECT					
			Value \$ 16,300.00				20,512.00	4,212.00
Account No.			Value \$					
			Value \$					
Account No.			Value \$					
Sheet 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims Subtotal (Total of this page)							265,863.00	34,563.00
Total (Report on Summary of Schedules)					ıl	372,020.00	111,870.00	

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B6E (Official Form 6E) (4/13)

In re	James C. Adams,	Case No.	
	Sharon L. Adams		
_		Debtors	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the

column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the columns.) Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the b [Total] on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.	
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to isted on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this talso on the Statistical Summary of Certain Liabilities and Related Data.	
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not en priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts reportal also on the Statistical Summary of Certain Liabilities and Related Data.	
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)	
☐ Domestic support obligations	
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).	e relativ
☐ Extensions of credit in an involuntary case	
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointm rustee or the order for relief. 11 U.S.C. § 507(a)(3).	nent of a
☐ Wages, salaries, and commissions	
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independe representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, which occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).	
☐ Contributions to employee benefit plans	
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).	business
☐ Certain farmers and fishermen	
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).	
☐ Deposits by individuals	
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were relelivered or provided. 11 U.S.C. § 507(a)(7).	not
Taxes and certain other debts owed to governmental units	
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).	
☐ Commitments to maintain the capital of an insured depository institution	
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).	Federal
☐ Claims for death or personal injury while debtor was intoxicated	
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, on another substance. 11 U.S.C. § 507(a)(10).)r

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

continuation sheets attached

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B6E (Official Form 6E) (4/13) - Cont.

In re	James C. Adams,		Case No.	
	Sharon L. Adams			
-		Debtors	-,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Tax year??? Notice???? Account No. Commonwealth of VA-Tax 0.00 P.O. Box 2156 Richmond, VA 23218-2156 0.00 0.00 Tax year??? Notice???? Account No. Internal Revenue Service 0.00 **Centralized Insolvency Unit** P O Box 7346 Philadelphia, PA 19101-7346 0.00 0.00 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 0.00 0.00 Total 0.00 (Report on Summary of Schedules) 0.00 0.00

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B6F (Official Form 6F) (12/07)

In re	James C. Adams, Sharon L. Adams		Case No.	
_		Debtors	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	Ţ	₽Ī	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		COXT-XGEX	QU	1	T F	AMOUNT OF CLAIM
Account No.			Medical	٦ _٢	D A T E D		Ī	
Barry Kurzer DDS 5921 Harbour Lane Midlothian, VA 23112		w						2,488.00
Account No.	\dagger	T		\dagger	\vdash	t	\dagger	
American Credit Bureau 2755 S Federal Hwy Boynton Beach, FL 33435			Collection agency: Barry Kurzer DDS					Notice Only
Account No. xxxxxxxx1332	┪	T	Opened 7/29/11 Last Active 7/03/14	\dagger	T	t	十	
Cap One Po Box 85520 Richmond, VA 23285		w	Credit Card					
		L			L	l	\perp	949.00
Account No. Commonwealth Radiology 1508 William Lawn Drive Suite 117 Richmond, VA 23230		w	Medical					117.00
2 continuation sheets attached		_		Subt			7	3,554.00
continuation sheets attached			(Total of t	his	pag	ge))	3,334.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	James C. Adams,	Case No
_	Sharon L. Adams	,

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDAT	DISPUTED	:	AMOUNT OF CLAIM
Account No.			Credit Card	T	E			
Country Door 1112 7th Avenue Monroe, WI 53566-1364		J			D			1,855.00
Account No. xxxx8908	t	H	Opened 4/01/14 Last Active 6/01/14	T	\vdash	t	†	
Horizon Fin 8585 Broadway #88 Merrillville, IN 46410	•	w	Medical Debt Medical					50.00
Account No. xxxxxxxxxxxx8176	t		Opened 7/31/13 Last Active 7/02/14		T	T	†	
Kohls/Capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051		J	Charge Account					629.00
Account No.	t	H			\vdash	T	\dagger	
Paypal Credit P. O. Box 105658 Atlanta, GA 30348		w						900.00
Account No.	t	T	Medical	T	T	T	†	
St. Francis Medical Center P. O. Box 404893 Shawnee Mission, KS 66250		w						700.00
Sheet no1 of _2 sheets attached to Schedule of				Sub	tota	ıl	†	4 424 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ze)	, L	4,134.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	James C. Adams,	Case No
_	Sharon L. Adams	,

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

_	_			_	_	_	
CODEBT	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTIN	1 ()	I S P U T		AMOUNT OF CLAIM
O R	C	IS SUBJECT TO SETOFF, SO STATE.	GEN	Ľ	15	= 1	AMOUNT OF CLAIM
			Ť	T E D		Ī	
		Collection agency: St. Francis Medical Center					Notice Only
┢		Opened 10/11/13 Last Active 7/03/14	+		t	+	
	w	_					
							1,745.00
		Opened 10/29/13 Last Active 7/16/14	T			1	
	\ \						
	**						
							977.00
H			\dagger			1	
\vdash			+			1	
<u> </u>			 Sub	tota	L al	+	
)	2,722.00
		(Report on Summary of So				,	10,410.00
	CODEBTOR	O D H W J C	Collection agency: St. Francis Medical Center Opened 10/11/13 Last Active 7/03/14 Charge Account W Opened 10/29/13 Last Active 7/16/14 Credit Card W (Total of the state	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Collection agency: St. Francis Medical Center Opened 10/11/13 Last Active 7/03/14 Charge Account W Opened 10/29/13 Last Active 7/16/14 Credit Card W Sub (Total of this	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Collection agency: St. Francis Medical Center Opened 10/11/13 Last Active 7/03/14 Charge Account W Opened 10/29/13 Last Active 7/16/14 Credit Card W Subtota (Total of this pay Total of this pa	Consideration for Claim. If Claim is Subject to Setoff, So State. Collection agency: St. Francis Medical Center Copened 10/11/13 Last Active 7/03/14 Charge Account Copened 10/29/13 Last Active 7/16/14 Credit Card W Subtotal (Total of this page Total)	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Collection agency: St. Francis Medical Center Copened 10/11/13 Last Active 7/03/14 Charge Account W Copened 10/29/13 Last Active 7/16/14 Credit Card W Subtotal (Total of this page)

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B6G (Official Form 6G) (12/07)

In re	James C. Adams,	Case No
	Sharon L. Adams	

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Devon	Oil mineral rights lease
Loftis	Oil mineral rights lease
Sampson	Oil mineral rights lease
Verizon - Bankrutpcy Dept	Cell phone contract ASSUME
Williams	Oil mineral rights lease

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B6H (Official Form 6H) (12/07)

In re	James C. Adams,	Case No.
	Sharon L. Adams	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Del	otor 1 James C.	Adams		
	otor 2 Sharon L. use, if filing)	Adams		
Uni	ted States Bankruptcy Court for t	e: EASTERN DISTRICT	OF VIRGINIA	
(If kr	se number		-	Check if this is: ☐ An amended filing ☐ A supplement showing post-petition chapter 13 income as of the following date:
<u>O</u>	fficial Form B 6I			MM / DD/ YYYY
S	chedule I: Your Inc	come		12/1:
spo atta	olying correct information. If yourse. If you are separated and you	u are married and not filit our spouse is not filing w . On the top of any additi	ith you, do not include information	with you, include information about your about your about your spouse. If more space is needed,
spo	olying correct information. If yourse. If you are separated and you	u are married and not fili our spouse is not filing w	ng jointly, and your spouse is living ith you, do not include information	with you, include information about your
spo atta	plying correct information. If you are separated and you are separated and you a separate sheet to this form t1: Describe Employment	u are married and not filit our spouse is not filing w . On the top of any additi	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and ca	y with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question
spo atta Par	clying correct information. If you see. If you are separated and you have separated to this form t1: Describe Employment information. If you have more than one job,	u are married and not filing wi our spouse is not filing wi . On the top of any additi	ng jointly, and your spouse is living ith you, do not include information	with you, include information about your about your about your spouse. If more space is needed,
spo atta Par	plying correct information. If youse. If you are separated and you a separate sheet to this form t1: Describe Employment information.	u are married and not filit our spouse is not filing w . On the top of any additi	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and ca	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse
spo atta Par	plying correct information. If you are separated and you have separated to this form t1: Describe Employment information. If you have more than one job, attach a separate page with	u are married and not filin our spouse is not filing w . On the top of any additi t	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and ca	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse
spo atta Par	plying correct information. If you are separated and you have separated to this form t1: Describe Employment information. If you have more than one job, attach a separate page with information about additional	u are married and not filing wi our spouse is not filing wi . On the top of any additi t	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and ca Debtor 1 Employed Not employed	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse
spo atta Par	plying correct information. If youse. If you are separated and you has separate sheet to this form t1: Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	u are married and not filing with spouse is not filing with the top of any addition to the top of any additional top of additiona	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and ca Debtor 1 Employed Not employed Facility Director	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse
spo atta Par	clying correct information. If youse. If you are separated and you have separated and you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include studentines. If you have more than one job, attach a separate page with information about additional employers.	u are married and not filing with spouse is not filing with the top of any addition to the top of any additional top of additiona	pebtor 1 Employed Not employed Facility Director Commonwealth of Virginia Dept of Game & Inland Fisheries 4010 W. Broad St. Richmond, VA 23230	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse
Par 1.	clying correct information. If youse. If you are separated and you have separated and you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include studentines. If you have more than one job, attach a separate page with information about additional employers.	u are married and not filing with spouse is not filing with the top of any addition to the top of addition to the top of addition to the top of addition to	pebtor 1 Employed Not employed Facility Director Commonwealth of Virginia Dept of Game & Inland Fisheries 4010 W. Broad St. Richmond, VA 23230	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 8,003.42 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 +\$ 0.00 3. \$ Calculate gross Income. Add line 2 + line 3. 8,003.42 0.00

Official Form B 6I Schedule I: Your Income page 1

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James C. Adams Debtor 1 Sharon L. Adams Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 8.003.42 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 1,806.26 0.00 5b. Mandatory contributions for retirement plans 5b. 391.40 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e Insurance 5e \$ 379.20 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. 0.00 0.00 Other deductions. Specify: 5h.+ 0.00 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 2.576.86 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 5.426.56 0.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 8a. 113.09 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. Unemployment compensation 8d. 0.00 0.00 8e. **Social Security** 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. Pension or retirement income 8g. 0.00 783.61 Amortized tax refund - Fed OWED 34.00 0.00 8h. Other monthly income. Specify: // State \$408 8h.+ Part time - Bowl America (Average) 56.80 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 203.89 783.61 10. Calculate monthly income. Add line 7 + line 9. 10 5.630.45 783.61 6.414.06 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 6,414.06 12 applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

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Fill in	n this inform	ation to identify y	our case:					
Debto	or 1	James C. Ad	dams			Che	eck if this is:	
							An amended filing	
Debto		Sharon L. A	dams					ving post-petition chapter
(Spot	use, if filing)						13 expenses as of	the following date:
Unite	d States Bank	cruptcy Court for the	EASTE	RN DISTRICT OF VIRGIN	IA		MM / DD / YYYY	
Case	number						A separate filing for	r Debtor 2 because Debtor
(If kno	own)						2 maintains a sepa	rate household
Off	ficial Fo	orm B 6J						
		J: Your	_ Exner	1808				12/13
				. If two married people ar	e filing together, hot	h are en	ially responsible fo	
infor	rmation. If n	nore space is ne	eeded, atta	ch another sheet to this				
num	ber (if knov	vn). Answer eve	ry questio	n.				
Part	1: Desc	ribe Your House	ehold					
1.	Is this a joi	nt case?						
	☐ No. Go t	o line 2.						
	Yes. Do	es Debtor 2 live	in a separ	ate household?				
	■ N	alo.	-					
			et filo a cor	parate Schedule J.				
		res. Debior 2 ma	si ille a sel	datate Scriedule J.				
2.	Do you hav	e dependents?	■ No					
	Do not list I Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state	e the						□ No
	dependents	s' names.						☐ Yes
								□ No
								Yes
								□ No
								☐ Yes
								□ No
•	D		_					☐ Yes
3.		penses include of people other t	than I	No				
		nd your depende		Yes				
Dont	O Fatter			h. F				
Part Estir	mate vour e	nate Your Ongoi	ng Wonth	ıy Expenses uptcy filing date unless y	ou are using this for	m as a s	unnlement in a Cha	inter 13 case to report
				y is filed. If this is a supp				
appl	icable date	•						
Inclu	ıde expens	es paid for with	non-cash	government assistance if	f vou know			
the v	alue of suc	ch assistance an		cluded it on Schedule I: Y			.,	
(Offi	cial Form 6	l.)					Your expe	enses
4.				ses for your residence. In	nclude first mortgage	4.	¢	1,498.26
	. ,	nd any rent for th	ie ground d	i iot.		٦.	*	-,
						4	Φ.	
		estate taxes	a or roots	's incurance		4a.	:	0.00
		erty, homeowner' a maintenance, re	•	ıpkeep expenses		4b. 4c.	<u> </u>	0.00
		e maintenance, re eowner's associa					\$ 	100.00 33.00
5.				our residence. such as ho	me equity loans	-ta. 5	\$	0.00

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	otor 1 otor 2	James C. Adams Sharon L. Adams	Case num	nber (if known)	
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	300.00
	6b.	Water, sewer, garbage collection	6b.	\$	72.31
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	355.00
	6d.	Other. Specify: Trash Pickup	6d.	·	30.00
7.		l and housekeeping supplies	7.	·	712.68
8.		Icare and children's education costs	8.	· -	0.00
9.		ning, laundry, and dry cleaning	9.	·	142.61
10.		onal care products and services	10.	· -	100.00
11.		cal and dental expenses	11.	\$	430.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	389.00
13.	Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Char	itable contributions and religious donations	14.	\$	75.00
15.	Insur				
		ot include insurance deducted from your pay or included in lines 4 or 20.	450	¢	050.00
		Life insurance Health insurance	15a. 15b.		256.90
		Vehicle insurance	15b. 15c.	*	0.00
					116.59
16		Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20.	15d.	\$	0.00
	Spec	ify: Personal Property Tax \$733.40	16.	\$	61.11
17.		Illment or lease payments:	47-	¢.	500.00
		Car payments for Vehicle 1	17a. 17b.		586.22
		Car payments for Vehicle 2		·	295.38
		Other Specify: Tolls	17c.	· -	80.00
	17u.	Other. Specify: Misc. expenses	17d.	\$	100.00
10	V	Vehicle upkeep 2010 & 2013 payments of alimony, maintenance, and support that you did not report as		Ф	70.00
10.		payments of alimony, maintenance, and support that you did not report as a letter from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
19.		r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.		0.00
20.	Othe	r real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
	20a.	Mortgages on other property	20a.		0.00
	20b.	Real estate taxes	20b.	·	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.		0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	21.	+\$	0.00
22.		monthly expenses. Add lines 4 through 21. result is your monthly expenses.	22.	\$	5,904.06
23.		ulate your monthly net income.		L	
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,414.06
		Copy your monthly expenses from line 22 above.	23b.		5,904.06
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	510.00
	_		***		

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes. Explain: Wife has applied for SSI Disability and is awaiting an appeal hearing.

Royalties on average for oil well mineral rights leases minus taxe Appox \$113 per month.

Debtors spend more on food because wife is on a restricted diet due to her medical issues. She spends more on gluten free and dairy free items.

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy Court Eastern District of Virginia

In re	James C. Adams Sharon L. Adams		Case No.	
		Debtor(s)	Chapter	13

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	1 1		ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief.	22
Date	December 23, 2014	Signature	/s/ James C. Adams James C. Adams Debtor	
Date	December 23, 2014	Signature	/s/ Sharon I Adams	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Sharon L. Adams Joint Debtor

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of Virginia

In re	James C. Adams Sharon L. Adams		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$93,937.92	(H) 2014 YTD: Commonwealth of VA Dec. 31, 2014
\$9,162.07	(W) 2014 YTD: Chesterfield County Public Schools May 30, 2014 No Longer Employed
\$107,429.00	(J) 2013: 1040 Income Tax Return
\$108.606.00	(J) 2012: 1040 Income Tax Return

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B7 (Official Form 7) (04/13)

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$5,377.27 (W) 2014 YTD: Virginia Retirement Systems December 2014

\$1,920.00 (H) 2014 YTD: Approximate Oil Royalties

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Pnc Mortgage 6 N Main St Dayton, OH 45402	DATES OF PAYMENTS Oct - Dec 2014 Monthly mortgage payment \$1,463.86 x 3	AMOUNT PAID \$4,391.58	AMOUNT STILL OWING \$245,351.00
Bb&T Po Box 1847 Wilson, NC 27894	Oct - Dec 2014 Monthly car payment \$586.22 x 3	\$1,758.66	\$35,657.00
Virginia Credit Union 7500 Boulders View Drive Richmond, VA 23225	Sept - Nov 2014 Monthly car payment \$295.37 x 3	\$886.11	\$20,512.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF	AMOUNT STILL
NAME AND ADDRESS OF CREDITOR	TRANSFERS	TRANSFERS	OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

3

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

-

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or

returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

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8. Losses

None П

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY 2011 Chrysler 200

DESCRIPTION OF CIRCUMSTANCES AND. IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Vehicle was totalled in an accident; vehicle was

covered by full coverage insurance

April 2014

9. Payments related to debt counseling or bankruptcy

None П

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

North & Associates, P.C. Bar# 29672 5913 Harbour Park Drive Midlothian, VA 23112

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR July 2014 - December 2014

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$1,000= \$424.15 costs + \$575.85 applied to attorny fee: \$424.15 = USB Filing fee \$310/ **Abucus Credit counseling \$25** /Debtor Education \$25/ Credit report \$38/ Priority mail \$5.15 /Homestead Clerk \$21

10. Other transfers

None

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

Josh Adams, son

DATE

March 2014 approx

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

2004 Dodge Dakota -- This vehicle belonged to Josh before he went to Afghanistan. He signed vehicle over to James and then when he returned, James signed the vehicle back over to Josh.

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

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11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DATE OF

ENVIRONMENTAL

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

NOTICE LAW

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS**

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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRES

None (

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

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22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year**

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 23, 2014 Signature /s/ James C. Adams

James C. Adams

Debtor

Date December 23, 2014 Signature /s/ Sharon L. Adams

Sharon L. Adams
Joint Debtor

Joint Deoto

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form B203

2014 USBC, Eastern District of Virginia

United States Bankruptcy Court Eastern District of Virginia

In 1	James C. Adams ^{(n re} Sharon L. Adams	Case 1	No.	
111 .	Debtor(s)	Chapt		
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FO	R DEBTO	R
	IN A CHAPTER 13 CA			
	(for use in the Richmond Div	ision only)		
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that compensation paid to me, for services rendered or to be rendered on behalf of bankruptcy case is as follows:			
	For legal services, I have agreed to accept	s	5,00	0.00
	Prior to the filing of this statement I have received		57	<u> 5.85 </u>
	Balance Due	\$	4,42	<u>4.15</u>
2.	\$310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	$\blacksquare \text{Debtor} \Box \text{Other } (specify)$			
4.	The source of compensation to be paid to me is:			
	$\blacksquare \text{Debtor} \Box \text{Other } (specify)$			
5.	\square I have not agreed to share the above-disclosed compensation with any other pe	erson unless they are r	nembers and a	ssociates of my law firm.
	■ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing it \$575.85 applied to attorny fee: \$424.15 = USB Filing fee \$310/ Abuse Credit report \$38/ Priority mail \$5.15 /Homestead Clerk \$21	in the compensation, i	s attached. \$1	,000= \$424.15 costs +
6.	In return for the above-disclosed fee, I have agreed to render legal service for Bankruptcy Rule 2016-1(C)(3).	all aspects of the bank	ruptcy case, as	s required by Local
7.	I am electing to request compensation and reimbursement of expenses in this c	case:		
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule	2016-1(C)(1)(a) and	(C)(3)(a).	
	b. \square By submitting applications for compensation in the manner set forth in L	ocal Bankruptcy Rule	2016-1(C)(1)	(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation $(C)(3)(a)$ at the commencement of the case will be deemed to have elected to a Bankruptcy Rule $2016-1(C)(1)(c)(ii)$.			

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Form B203

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2014 USBC, Eastern District of Virginia

CERTIFICATION

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 23, 2014

Date

/s/ Pia J. North

Pia J. North 29672

Signature of Attorney

North Law Bar# 29672

Name of Law Firm 5913 Harbour Park Drive Midlothian, VA 23112 (804) 739-3700 Fax: (804) 739-2550

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

December 23, 2014

Date

/s/ Pia J. North

Pia J. North 29672

Signature of Attorney

North & AG 360 164-36850-KLP 5913 Harbour Park Drive Midlothian, VA 23112

Doc 1 Greilect 12/31/14 10:45:54 Crelles Shi Main CPOCHEMENTON SPANISH, 47egf A5 4701 Cox Rd, Ste 285 Glen Allen, VA 23060

7500 Boulders View Drive Richmond, VA 23225

American Credit Bureau 2755 S Federal Hwy Boynton Beach, FL 33435

Green Tree Servicing LLC Keith Anderson, President 345 St. Peter Street Saint Paul, MN 55102

Barry Kurzer DDS 5921 Harbour Lane Midlothian, VA 23112

Horizon Fin 8585 Broadway #88 Merrillville, IN 46410

Bb&T Po Box 1847 Wilson, NC 27894 Internal Revenue Service Centralized Insolvency Unit P O Box 7346 Philadelphia, PA 19101-7346

BCC Financial Management P. O. Box 590097 Fort Lauderdale, FL 33359

Kohls/Capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Cap One Po Box 85520 Richmond, VA 23285 Paypal Credit P. O. Box 105658 Atlanta, GA 30348

Commonwealth of VA-Tax P.O. Box 2156 Richmond, VA 23218-2156

Pnc Mortgage 6 N Main St Dayton, OH 45402

Commonwealth Radiology 1508 William Lawn Drive Suite 117 Richmond, VA 23230

St. Francis Medical Center P. O. Box 404893 Shawnee Mission, KS 66250

Country Door 1112 7th Avenue Monroe, WI 53566-1364

Syncb/Sleepys Po Box 965036 Orlando, FL 32896

Green Tree Servicing LLC 332 Minnesota St Ste 610 Saint Paul, MN 55101

Td Bank Usa/Target Credit Po Box 673 Minneapolis, MN 55440

Fill in this information to identify your case:					
Debtor 1	James C. Adams				
Debtor 2 (Spouse, if filing	Sharon L. Adams				
United States Ba	ankruptcy Court for the: Eastern District of Virginia				
Case number (if known)					

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3)							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3)							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

y	ou have nothing to report for any line, write 40 in the space.		
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$	\$0.00_
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$	\$
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00_	\$0.00
5.	Net income from operating a business, profession, or farm		
	Gross receipts (before all deductions) \$ 0.00		
	Ordinary and necessary operating expenses -\$ 0.00		
	Net monthly income from a business, profession, or farm \$ 0.00 Copy here ->	\$	\$
6.	Net income from rental and other real property Gross receipts (before all deductions) \$ 0.00 Ordinary and necessary operating expenses -\$ 0.00 Net monthly income from rental or other real property \$ 0.00 Copy here ->	\$0.00	\$0.00_

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1 Debtor 2	James C. Adams Sharon L. Adams			_	Case numbe	r (<i>if known</i>)			
					Column A Debtor 1		Column B Debtor 2	or	
7. In	terest, dividends, and	rovalties			\$	160.05	\$	0.00	
	nemployment compen	•			\$	0.00	\$	0.00	
the	e Social Security Act. In			benefit under					
	For you		\$	0.00					
	For your spouse		\$	0.00					
	ension or retirement in enefit under the Social S	ncome. Do not include any Security Act.	amount received th	nat was a	\$	0.00	\$	609.07	
Do red do	o not include any benefi ceived as a victim of a v	burces not listed above. Its received under the Soci war crime, a crime against essary, list other sources of	al Security Act or pa humanity, or interna	ayments ational or					
	10a.				\$	0.00	\$	0.00	
	10b.				\$	0.00	\$	0.00	
	10c. Total amounts fro	om separate pages, if any.		+	\$	0.00	\$	0.00	
		rent monthly income. Add ne total for Column A to the			7,905.94	+	609.07	=[\$_	8,515.01
12. C c 13. C c		o Measure Your Deduction of monthly income from linguistment. Check one:						\$	8,515.01
	You are not married.	Fill in \$0 on line 3d.							
	You are married and	your spouse is filing with	you. Fill in 0 in line 1	13d.					
	You are married and	I your spouse is not filing w	vith you.						
	dependents, such as	the income listed in line 11 s payment of the spouse's	tax liability or the sp	ouse's suppor	rt of someon	e other th	an you or yo	ur depend	ents.
	adjustments on a se			mount of incor	ne devoted t	o each pu	urpose. If ned	essary, lis	st additional
		es not apply, enter 0 on lin		Φ.					
						_			
	13c.			v		_			
				<u></u> -⊸					
	13d. Total			\$	0.0	<u>0</u> c	py here=> 13	8d	0.00
14. Y	our current monthly i	ncome. Subtract line 13d	from line 12.				14	4. \$	8,515.01
15. C	Calculate your current	monthly income for the	year. Follow these	steps:					
1	5a. Copy line 14 here	=>					15	a. \$	8,515.01
		by 12 (the number of month						X	12
1	5b. The result is your	current monthly income fo	r the year for this pa	art of the form			15	b. \$ 1	02,180.12

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Debtor 2		Sharon L. Adams		Case number (if known)			
16. (Cald	culate the median family income that applies to yo	ou. Follow thes	se steps:			
1	16a	. Fill in the state in which you live.	VA				
1	16h	. Fill in the number of people in your household.	2				
		Fill in the median family income for your state and s			160	æ	67,021.00
·		To find a list of applicable median income amounts, instructions for this form. This list may also be available.	, go online usin	g the link specified in the separate	16c.	Φ	
17. F	Hov	w do the lines compare?					
1	17a	. ☐ Line 15b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No.					determined under
1	17b	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcul current monthly income from line 14 above.					
Part 3	3:	Calculate Your Commitment Period Under 11 t	J.S.C. §1325(b	0)(4)			
18. (Cop	by your total average monthly income from line 11	l		18. \$;	8,515.01
C	cont	duct the marital adjustment if it applies. If you are nated that calculating the commitment period under 11 use's income, copy the amount from line 13d.					
	•	e marital adjustment does not apply, fill in 0 on line 1	9a.		19a. - \$;	0.00
\$	Sub	otract line 19a from line 18.			19b.	\$	8,515.01
20. (Cald	culate your current monthly income for the year.	Follow these s	teps:			
2	20a	. Copy line 19b here			20a.	\$_	8,515.01
		Multiply by 12 (the number of months in a year).				<u>X</u>	12
2	20b	. The result is current monthly income for the year for	r this part of the	e form	20b.	\$ <u></u>	102,180.12
2	20c.	. Copy the median family income for your state and s	size of househo	old from line 16c		\$	67,021.00
2	21.	How do the lines compare?					
		☐ Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the	ne court, on the top of page 1 of this form,	check b	ox 3, 7	The commitment
		Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise	ordered by the court, on the top of page 1	of this fo	orm, ch	neck box 4, The
Part 4	1:	Sign Below	_				
Е	Зу s	signing here, under penalty of perjury I declare that th	ne information of	on this statement and in any attachments	is true aı	nd corr	ect.
X	/s/	/ James C. Adams		X /s/ Sharon L. Adams			
	Ja	mes C. Adams quature of Debtor 1		Sharon L. Adams Signature of Debtor 2			
	•	e December 23, 2014		Date December 23, 2014			
-		MM/DD/YYYY		MM/DD/YYYY			
	•	ou checked line 17a, do NOT fill out or file Form 22C- ou checked line 17b, fill out Form 22C-2 and file it with			onthly inc	ome fr	om line 14

James C. Adams

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Debtor 1	James C. Adams		
Debtor 2 (Spouse, if fil	Sharon L. Adams		
United States	Bankruptcy Court for the: Eastern District of Virginia		
Case number (if known)		☐ Check if this is an amended filing	
Official I	Form 22C - 2		
	13 Calculation of Your Disposable Income		12/14

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly income and Calculation of Commitment Period (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,092.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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People	who are under 65 years of age	
7a	. Out-of-pocket health care allowance per person	\$ 60
7b	. Number of people who are under 65	x 2
7 c	. Subtotal. Multiply line 7a by line 7b.	\$ 120.00 Copy line 7c here=> \$ 120.00
People	who are 65 years of age or older	
7 d	. Out-of-pocket health care allowance per person	\$144_
7e	. Number of people who are 65 or older	xo
7f.	Subtotal. Multiply line 7d by line 7e.	\$ \$ Copy line 7f here=> \$ 0.00
7 g	. Total. Add line 7c and line 7f	\$ 120.00 Copy total here=> 7g. \$ 120.00
Local S	Standards You must use the IRS Local Standards t	o answer the questions in lines 8-15.
	on information from the IRS, the U.S. Trustee Proptcy purposes into two parts:	gram has divided the IRS Local Standard for housing for
Housin	g and utilities - Insurance and operating expense g and utilities - Mortgage or rent expenses	s
To ans	wer the questions in lines 8-9, use the U.S. Truste	•
To find clerk's		arate instructions for this form. This chart may also be available at the bankruptcy
	busing and utilities - Insurance and operating exposite dollar amount listed for your county for insurance	enses: Using the number of people you entered in line 5, fill and operating expenses. 498.00
9. H d	ousing and utilities - Mortgage or rent expenses:	
9a	. Using the number of people you entered in line 5, listed for your county for mortgage or rent expense	
9b	. Total average monthly payment for all mortgages a	and other debts secured by your home.
		• •
	To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60.	dd all amounts that are
	contractually due to each secured creditor in the 6	dd all amounts that are
	contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60.	dd all amounts that are 0 months after you file Average monthly
	contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60. Name of the creditor	Average monthly payment \$ 1,498.26
	contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60. Name of the creditor	Average monthly payment \$ 1,498.26
90	contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60. Name of the creditor Pnc Mortgage 9b. Total average monthly payments	Average monthly payment \$ 1,498.26 Copy line
90	contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60. Name of the creditor Pnc Mortgage 9b. Total average monthly payments	Average monthly payment \$ 1,498.26 The state of the control of t
10. lf :	contractually due to each secured creditor in the 6 for bankruptcy. Then divide by 60. Name of the creditor Pnc Mortgage 9b. Total average monthly payment Net mortgage or rent expense. Subtract line 9b (total average monthly payment) for rent expense). If this amount is less than \$0, en	Average monthly payment \$ 1,498.26 Tom line 9a (mortgage ter \$0. 9c. \$ 0.00 Copy line 9c. \$ 0.00

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 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. □ 1. Go to line 12. ■ 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the <i>Operating Costs</i> that apply for your Census region or metropolitan statistical area. 502.45
☐ 1. Go to line 12. ☐ 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the
2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the
12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the
13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below.
You may not claim the expense if you do not make any loan or lease payments
Vehicle 1 Describe Vehicle 1: 2013 Honda Ridgeline
13a. Ownership or leasing costs using IRS Local Standard 13a. \$ 517.00
13b. Average monthly payment for all debts secured by Vehicle 1.
Do not include costs for leased vehicles.
To calculate the average monthly payment here and on line 13e, add all amounts that
are contractually due to each secured creditor in the 60 months after you filed for
bankruptcy. Then dived by 60.
Name of each creditor for Vehicle 1 Average monthly
payment
Bb&T
here => -\$
13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1
Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0.
13C. \$ here => \$
Vehicle 2 Describe Vehicle 2:
2010 Acura TSX
13d. Ownership or leasing costs using IRS Local Standard 13d. \$
13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for
leased vehicles.
Name of each creditor for Vehicle 2 Average monthly payment
• •
Virginia Credit Union \$ 295.38 Copy 13e
here => -\$ 295.38
13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2
Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0.
13f. \$21.02 here => \$21.02
14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the <i>Public</i>
Transportation expense allowance regardless of whether you use public transportation. \$ 0.00
15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may
also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for <i>Public Transportation</i> . \$

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Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses	for	
16.	the following IRS categories. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from		
	your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	\$	1,672.82
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.	\$	391.40
40	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	Ψ	001.40
10.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	132.38
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	310.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22A-1, or any amount you previously deducted.	+\$	50.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	4,990.67
Add	litional Expense Deductions These are additional deductions allowed by the Means Test.		
	Note: Do not include any expense allowances listed in lines 6-24.		
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.		
	Health insurance \$ 601.50		
	Disability insurance \$ 0.00		
	Health savings account + \$ 0.00		
	Total \$ 601.50 Copy total here=>	\$	601.50
	Do you actually spend this total amount? No. How much do you actually spend?		
	■ Yes \$		
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	0.00
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.		_
	By law, the court must keep the nature of these expenses confidential.	\$	0.00

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28.	Additional home energy costs. Your hom allowance on line 8.	e energy costs are included in your non-mort	gage housing and utilities		
		osts that are more than the home energy cost ce, then fill in the excess amount of home ene			
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must s ry.	show that the additional	\$_	0.00
29.	Education expenses for dependent child \$156.25* per child) that you pay for your de public elementary or secondary school.	ren who are younger than 18. The monthly pendent children who are younger than 18 ye	expenses (not more than ears old to attend a private or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must ϵ ot already accounted for in lines 6-23.	explain why the amount		
	* Subject to adjustment on 4/01/16, and eve	ry 3 years after that for cases begun on or af	ter the date of adjustment.	\$	0.00
30.		ne monthly amount by which your actual food allowances in the IRS National Standards. To the IRS National Standards.			
		onal allowance, go online using the link speci o be available at the bankruptcy clerk's office			
	You must show that the additional amount of	laimed is reasonable and necessary.		\$	0.00
31.	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in nization. 26 U.S.C. § 170(c)(1)-(2)	the form of cash or financial	\$_	85.83
32.	Add all of the additional expense deduct Add lines 25 through 31.	ions		\$	687.33
Ded	uctions for Debt Payment				
	For debts that are secured by an interest i oans, and other secured debt, fill in lines	n property that you own, including home i 33a through 33g.	mortgages, vehicle		
	To calculate the total average monthly paymoreditor in the 60 months after you file for bar	ent, add all amounts that are contractually dukruptcy. Then divide by 60.	e to each secured		
	Mortgages on your home:			Averag	ge monthly
33a.	Copy line 9b here		=>	\$	1,498.26
	Loans on your first two vehicles				<u> </u>
33b.	•		=>	\$	586.22
33c.				\$	295.38
Nam	ne of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
			□ No		
33d.	-NONE-		☐ Yes	\$	
		_		·	
			□ No		
33e.			☐ Yes	\$	
			□ No		
33f.			□ Yes +	\$	
33g.	Total average monthly payment. Add lines	33a through 33f	\$ 2,379.86 Copy total here=		2,379.86

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		e 33 secured by your prima ur support or the support o						
■ No	Co to line OF							
_ 110.		must pay to a creditor, in add ssession of your property (ca n the information below.						
Name of the	creditor	Identify property that secure	es the debt	To	otal cure amount		onthly cu mount	re
-NONE-				\$	÷	-60 = \$		
				_		¬com/		
			Tota	al \$	0.00	Copy total here=>	. \$	0.00
		ch as a priority tax, child su f your bankruptcy case? 11		hat		_		
■ No.	Go to line 36.							
☐ Yes.		Il of these priority claims. Do ch as those you listed in line						
	Total amount of all past-d	ue priority claims		\$	0.00	÷ 60 =	\$	0.00
For more	information, go online using	r Chapter 13? 11 U.S.C. § 1 g the link for <i>Bankruptcy Basi</i> <i>Basics</i> may also be available	cs specified in the sep					
□ No.	Go to line 37.							
Yes.	Fill in the following information	tion.						
	Projected monthly plan pay	ment if you were filing under	Chapter 13	\$	670.00			
	Administrative Office of the	district as stated on the list iss United States Courts (for dis the Executive Office for United	stricts in Alabama	Х	10.00			
	Average monthly administr	ative expense if you were filir	ng under Chapter 13		\$ 67.00	Copy tota here=>		67.00
	of the deductions for debtes 33g through 36.	t payment.					\$	2,446.86
Total Deduc	tions from Income							
38. Add all c	of the allowed deductions.							
	ne 24, All of the expenses all e allowances	lowed under IRS	\$ 4,990.	67				
Copy lin	ne 32, All of the additional ex	pense deductions	\$687.	33				
Copy lir	ne 37, All of the deductions f	or debt payment	+\$ 2,446.	86_	٦			
Total de	eductions		\$8,124.	86	Copy total here=>		\$	8,124.86

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Part 2: De	etermine You	r Disposable Income Under 11 U.S.C.	§ 1325(b	ı)(2)				
		ent monthly income from line 14 of Fo Current Monthly Income and Calculatio					\$	8,515.01
childrer disability received	n. The monthly payments for din accordance	ly necessary income you receive for so y average of any child support payments or a dependent child, reported in Part I of the with applicable nonbankruptcy law to the ended for such child.	s, foster c	are payments, or C-1, that you	:	\$	0.00	
employe in 11 U.	41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).				\$5	0.00		
42. Total of	all deduction	ns allowed under 11 U.S.C. § 707(b)(2))(A). Cop	y line 38 here=	:>	\$8,12	4.86	
expense their exp	es and you ha	al circumstances. If special circumstance ive no reasonable alternative, describe the must give your case trustee a detailed expecumentation for the expenses.	he specia	l circumstances an	nd			1
Describe th	ne special cir	cumstances		Amount of expe	ense	е		
43a				\$		_		
43b				\$		_		
43c				\$		_		ĺ
43d. Tot a	al. Add lines 4	3a through 43c.	\$_	0.00		copy 43d ere=> \$	0.00	
44. Total ac	djustments. /	Add lines 40 through 43d.		=>	\$_	8,174.86	Copy total here=> -\$	8,174.86
	·	thly disposable income under § 1325(k	b)(2). Sub	otract line 44 from I	line	39.	\$	340.15
Part 3: Ch	nange in Inco	ome or Expenses						
reported your bar below. F 22C-1 ir	d in this form hankruptcy petition For example, in the first column	or expenses. If the income in Form 22C-1 have changed or are virtually certain to choon and during the time your case will be if the wages reported increased after you mn, enter line 2 in the second column, expense the increase occurred, and fill in the amount of the increase occurred, and fill in the amount of the increase occurred.	change aft open, fill u filed you explain wh	ter the date you file in the information or petition, check by the wages	ed			
Form	Line	Reason for change		Date of change)	Increase or decrease?	Amount of	change
☐ 22C-1 ☐ 22C-2					_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Increase	\$ \$ \$	

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art 4:	Sign Below	
E	By signing here, under penalty of perjury you dec	are that the information on this statement and in any attachments is true and correct.
X	/s/ James C. Adams	χ /s/ Sharon L. Adams
•	James C. Adams Signature of Debtor 1	Sharon L. Adams Signature of Debtor 2
	December 23, 2014 MM / DD / YYYY	Date <u>December 23, 2014</u> MM / DD / YYYY
	MM / DD / YYYY	MM/DD/YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2014 to 11/30/2014.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Bowl America

Year-to-Date Income:

Starting Year-to-Date Income: \$456.78 from check dated 5/31/2014 Ending Year-to-Date Income: \$880.93 from check dated 11/30/2014

Income for six-month period (Ending-Starting): \$424.15.

Average Monthly Income: \$70.69.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Commonwealth of VA

Year-to-Date Income:

Starting Year-to-Date Income: \$\frac{\$40,017.10}{\$84,123.54}\$ from check dated \frac{5/31/2014}{11/30/2014}.

Income for six-month period (Ending-Starting): \$44,106.44 .

Average Monthly Income: \$7,351.07.

Remarks:

Taxes: \$9,947.31 6 months for monthly payment of \$1,657.88

Member Retirement: \$391.40

HealthCare: \$244 Life: \$122.20 Def. Comp, Vol: \$50

What is CVC: \$10.00 What is Revenue: \$3.00

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: VRS - No longer receiving

Income by Month:

6 Months Ago:	06/2014	\$244.00
5 Months Ago:	07/2014	\$244.00
4 Months Ago:	08/2014	\$1,456.80
3 Months Ago:	09/2014	\$0.00
2 Months Ago:	10/2014	\$0.00
Last Month:	11/2014	\$0.00
	Average per month:	\$324.13

Line 7 - Interest, dividends, and royalties

Source of Income: Devon Energy Production Co.

Income by Month:

medine of month.		
6 Months Ago:	06/2014	\$203.68
5 Months Ago:	07/2014	\$0.00
4 Months Ago:	08/2014	\$202.28
3 Months Ago:	09/2014	\$179.25
2 Months Ago:	10/2014	\$0.00
Last Month:	11/2014	\$177.10
	Average per month:	\$127.05

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Line 7 - Interest, dividends, and royalties

Source of Income: Loftis Oil & Gas Company

Income by Month:

6 Months Ago:	06/2014	\$0.00
5 Months Ago:	07/2014	\$0.00
4 Months Ago:	08/2014	\$0.00
3 Months Ago:	09/2014	\$0.00
2 Months Ago:	10/2014	\$0.00
Last Month:	11/2014	\$38.68
	Average per month:	\$6.45

Line 7 - Interest, dividends, and royalties

Source of Income: New Dominion

Income by Month:

6 Months Ago:	06/2014	\$0.00
5 Months Ago:	07/2014	\$0.00
4 Months Ago:	08/2014	\$0.00
3 Months Ago:	09/2014	\$0.00
2 Months Ago:	10/2014	\$0.00
Last Month:	11/2014	\$105.37
	Average per month:	\$17.56

Line 7 - Interest, dividends, and royalties

Source of Income: Samson Resources Company

Income by Month:

6 Months Ago:	06/2014	\$0.00
5 Months Ago:	07/2014	\$0.00
4 Months Ago:	08/2014	\$53.93
3 Months Ago:	09/2014	\$0.00
2 Months Ago:	10/2014	\$0.00
Last Month:	11/2014	\$0.00
	Average per month:	\$8.99

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **06/01/2014** to **11/30/2014**.

Line 9 - Pension and retirement income

Source of Income: Virginia Retirement Systems

Income by Month:

6 Months Ago:	06/2014	\$266.00
5 Months Ago:	07/2014	\$266.00
4 Months Ago:	08/2014	\$777.61
3 Months Ago:	09/2014	\$783.61
2 Months Ago:	10/2014	\$783.61
Last Month:	11/2014	\$777.61
	Average per month:	\$609.07

Remarks:

Health Insurance - \$64.00 Monthly

July ytd is \$532.02